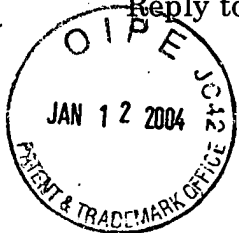


Appl. No. 10,089,598  
Amendment Dated January 8, 2004  
Reply to Office Action of October 9, 2003

Attorney Docket No. 81833.0036  
Customer No. 26021



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:  
SHOGO KAKIUCHI et al.  
Serial No.: 10/089,598  
Confirmation No.: 3037  
Filed: July 1, 2002  
For: TRANSFER DEVICE, INSPECTION  
DEVICE, AND ALIGNINGLY  
FEEDING DEVICE

Art Unit: 3651  
Examiner: Gene O.  
Crawford

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AMENDMENT UNDER 37 C.F.R. § 1.116

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Dear Sir:

In response to the Final Office Action dated October 9, 2003, please amend  
the above-referenced application as follows:

**Amendments** to the Claims are reflected in the listing of claims which begins on  
page 2 of this paper.

**Remarks/Arguments** begin on page 11 of this paper.

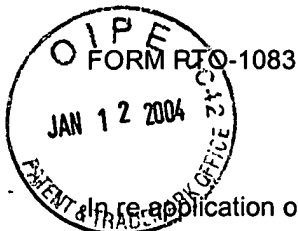
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01/13/2004 JBALINAN 00000120 501314 10089598

02 FC:1202 162.00 DA



Attorney Docket No. 81833.0036  
Patent Application No. 10/089,598

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re-application of:

Shogo KAKIUCHI, et al.

Serial No: 10/089,598

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Examiner: Crawford, G.O.

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Diane Zynn

Name

*Diane Zynn*  
Signature

01/08/04

Date

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ A Request for Continued Examination (RCE) is enclosed.  
☒ An Information Disclosure Statement is enclosed.  
☐ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	40	-	31 **	9	LG=\$18 SM=\$9	\$18	\$ 162
INDEPENDENT CLAIMS FEE	3	-	3 ***	0	LG=\$86 SM=\$42	\$0	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$140		\$ 0
Independent Claims: 1, 6, 16 and 19					TOTAL		\$ 162

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ Please charge the fee of **\$162** for the additional claim fees to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☐ Please charge the fee of **\$ 0** for the \_\_\_ month extension of time to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
HOGAN & HARTSON L.L.P.

By:

*Barry M. Shuman*  
Barry M. Shuman  
Registration No. 50,220

Date: January 8, 2004

Biltmore Tower  
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Los Angeles, California 90071  
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